≓III	in this info	ormation to identify your case:			
	otor 1	Fran Frascati			
	NOI 1	First Name Middle Name Last Name			
	otor 2 use if, filing)	First Name Middle Name Last Name			
Unit	ed States E	Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK			
Cas	e number	8-19-71525			
(if kno		0-19-71525			c if this is an ded filing
		orm 106Sum			
		of Your Assets and Liabilities and Certain Statistical Informatio			12/15
infor your	mation. Fi original fo	e and accurate as possible. If two married people are filing together, both are equally responsible out all of your schedules first; then complete the information on this form. If you are filing amounts, you must fill out a new <i>Summary</i> and check the box at the top of this page.			
Part	Sum	nmarize Your Assets			
				Your a	ssets of what you own
1.		e A/B: Property (Official Form 106A/B) line 55, Total real estate, from Schedule A/B		\$	370,000.00
	1b. Copy	line 62, Total personal property, from Schedule A/B		\$	95,005.71
	1c. Copy I	line 63, Total of all property on Schedule A/B		\$	465,005.71
Part	2: Sum	nmarize Your Liabilities			
					abilities t you owe
2.		D: Creditors Who Have Claims Secured by Property (Official Form 106D) the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D)	\$	536,728.38
3.		E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		\$	0.00
	3b. Сору	the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$	0.00
		Your total liabilit	ies \$_		536,728.38
Part	3: Sum	nmarize Your Income and Expenses			
4.		I: Your Income (Official Form 106I) r combined monthly income from line 12 of Schedule I		\$	10,433.12
5.		J: Your Expenses (Official Form 106J) r monthly expenses from line 22c of Schedule J		\$	5,598.17
Part	4: Ansv	wer These Questions for Administrative and Statistical Records			
6.	-	filing for bankruptcy under Chapters 7, 11, or 13? You have nothing to report on this part of the form. Check this box and submit this form to the court with	your o	ther sc	nedules.
7.	■ Yes	d of debt do you have?			
		r debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily sehold purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	for a pe	ersonal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Debtor 1 Fran Frascati

Case number (if known) 8-19-71525

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

10,461.50

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total claim	
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this infor	mation to identify	your case and th	nis filing	g:			
Debtor 1	Fran Frasca	ti					
D 14 0	First Name	Middle	Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle	Name	Last Name			
United States Ba	ankruptcy Court for	the: EASTERN	DISTRI	CT OF NEW YORK			
Case number	8-19-71525						☐ Check if this is an amended filing
Official Fo	orm 106A/E	3					
_	e A/B: Pi	_					12/15
think it fits best. E nformation. If mor Answer every ques	Be as complete and re space is needed, stion.	accurate as possibl attach a separate sl	e. If two heet to t	only once. If an asset fits in more than one of married people are filing together, both are enhis form. On the top of any additional pages, Estate You Own or Have an Interest In	qually respo	nsible for su	oplying correct
1.1	is the property?		What	t is the property? Check all that apply			
5 Seaton Street address,	Street if available, or other des	scription		Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured claims or exer the amount of any secured claims on Creditors Who Have Claims Secured		I claims on Schedule D:
Massape	qua NY	11758-0000		Manufactured or mobile home Land	Current val		Current value of the portion you own?
City	State	ZIP Code		Investment property Timeshare Other	Describe th		\$370,000.00 our ownership interest ancy by the entireties, or
				has an interest in the property? Check one Debtor 1 only	à life estate		
Nassau							
County				Debtor 1 and Debtor 2 only At least one of the debtors and another		if this is com	munity property
			Othe	r information you wish to add about this item erty identification number:	`	,	
			Res	idence: House			
2. Add the dol pages you h	lar value of the ponave attached for	ortion you own fo Part 1. Write that	r all of numbe	your entries from Part 1, including any e	entries for	=>	\$370,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Debto	or 1 F	ran Frascati			Case number (if known)	8-19-71525
3. Ca	rs, vans,	trucks, tracto	rs, sport utility ve	hicles, motorcycles		
		•		•		
•	Yes					
3.1	Make:	Kia		Who has an interest in the preparty? Observe	Do not deduct se	cured claims or exemptions. Put
3.1	Model:	Sedona		Who has an interest in the property? Check one Debtor 1 only		y secured claims on Schedule D: ave Claims Secured by Property.
	Year:	2015		Debtor 2 only	Current value of	
	Approxir	nate mileage:	12,502	Debtor 1 and Debtor 2 only	entire property?	
	Other in	formation:		\square At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$9,89	4.00 \$9,894.00
	amples: B No			d other recreational vehicles, other vehicles tercraft, fishing vessels, snowmobiles, motorcy		
				n for all of your entries from Part 2, includin that number here		\$9,894.00
			al and Household Ite al or equitable in	ems terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	<i>(amples:</i> No	goods and fur Major appliance scribe		, china, kitchenware		
		II	Household: tab maker, dressers	les, chairs, beds, microwave, toaster ov s,	ven, coffee	\$100.00
Ex	No	Televisions and		eo, stereo, and digital equipment; computers, p nedia players, games	rinters, scanners; music	collections; electronic devices
			Electronics: Tv'	s, Laptop		\$300.00
Ex	<i>camples:</i> No		gurines; paintings, s, memorabilia, co	prints, or other artwork; books, pictures, or othe llectibles	er art objects; stamp, coir	ı, or baseball card collections;
Ex	<i>camples:</i>	for sports and Sports, photogr musical instrum	aphic, exercise, an	d other hobby equipment; bicycles, pool tables	, golf clubs, skis; canoes	and kayaks; carpentry tools;
10. F i	irearms		shotguns, ammunii	tion, and related equipment		
	No	,,	3 ,	• • • •		
Officia	l Form 1	06A/B		Schedule A/B: Property		page 2

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Debtor 1	Fran Frascati			Case number (if known	9) 8-19-71525
Пуес	Describe				
11. Clothe Exami		nes, fur	s, leather coats, designer	r wear, shoes, accessories	
□ No	p. 00. = 10. j daj 0.0	,	s, realist esais, assigne		
Yes.	Describe				
	Г	01.41			\$500.00
	L	Clotne	s: standard		\$500.00
10 level					
12. Jewelr Exam		elry, cos	tume jewelry, engageme	ent rings, wedding rings, heirloom jewelry, watches, gems	gold, silver
□ No					
Yes.	Describe				
	Г	lowel	nu Wadding Dinga E	in accompany vine murch accord aver 20	
			go for less than \$4,	Engagement ring purchased over 30 000	\$4,000.00
			. ,		
13. Non-fa	arm animals				
	ples: Dogs, cats, bit	ds, hor	ses		
□ No					
Yes.	Describe				
	Г	Δnima	ls: JackRussell Terr	ier	\$0.00
	L'		io. Guorittuoodii Torri		
				, including any entries for pages you have attached	\$4,900.00
Part 4: De	escribe Your Financia	al Assets			
			quitable interest in any	of the following?	Current value of the
				-	portion you own?Do not deduct secured claims or exemptions.
16. Cash					'
	<i>ples:</i> Money you ha	ve in yo	our wallet, in your home,	in a safe deposit box, and on hand when you file your pet	ition
Yes.					
				Cash	\$20.00
17. Depos	its of money				
Exam				; certificates of deposit; shares in credit unions, brokerage	e houses, and other similar
□ No	institutions. If	you nav	e multiple accounts with	the same institution, list each.	
				Institution name:	
			Simple Checking		
		17.1.	1154	TD Bank (Jointly owned with spouse)	\$395.79
				TD D 1 (1) 41	
		17 0	Savings account	TD Bank (Jointly owned with spouse) Inheritance	\$48,724.83
		11.2.	(9169)	mentance	Ψ40,124.03

Official Form 106A/B Schedule A/B: Property page 3

D	ebtor 1	Fran Frascat	ti		Case number (if known) 8	-19-71525
			17.3.	Checking account 5693	Chase (Jointly owned with spouse)	\$43.07
			17.4.	Savings account 8236	Chase (Jointly owned with spouse) Inheritance	\$31,028.02
18.				cly traded stocks ent accounts with brokera	age firms, money market accounts	
	■ No □ Yes			Institution or issuer name	e:	
19.	Non-p		ock and	interests in incorporate	ed and unincorporated businesses, including an interest in	n an LLC, partnership, and
	■ No □ Yes.	Give specific info		about them me of entity:	% of ownership:	
20.	Negoti Non-n ■ No	iable instruments	include _l ents are	personal checks, cashiers those you cannot transfer	le and non-negotiable instruments of checks, promissory notes, and money orders. of to someone by signing or delivering them.	
21.	Exam _l	ment or pension ples: Interests in I	accoun), thrift savings accounts, or other pension or profit-sharing pla	ns
	■ No □ Yes.	List each accoun		tely. of account:	Institution name:	
22.	Your s		d deposi	ts you have made so that	you may continue service or use from a company cutilities (electric, gas, water), telecommunications companies	s, or others
	■ No				Institution name or individual:	
22			r a paria	die naumant of manay to	you, either for life or for a number of years)	
20.	■ No	iles (A contract to	n a peno	dic payment of money to	you, entrer for line or for a number of years)	
	☐ Yes	lss	suer nam	ne and description.		
24.		ts in an education C. §§ 530(b)(1), §			ied ABLE program, or under a qualified state tuition progra	am.
	☐ Yes	In:	stitution i	name and description. Se	parately file the records of any interests.11 U.S.C. § 521(c):	
25.		, equitable or fu	ture inte	rests in property (other	than anything listed in line 1), and rights or powers exerci	sable for your benefit
	■ No □ Yes.	Give specific info	ormation	about them		
26.					her intellectual property om royalties and licensing agreements	
	☐ Yes.	Give specific info	ormation	about them		
27.				er general intangibles llusive licenses, cooperati	ive association holdings, liquor licenses, professional licenses	
	☐ Yes.	Give specific info	ormation	about them		
M	oney or	property owed t	o you?			Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

De	ebtor 1	Fran Frascati		Case number (if known)	8-19-71525
28.	Tax ref	unds owed to you			
	■ No				
	☐ Yes.	Give specific information about them, ir	ncluding whether you already fil	ed the returns and the tax years	
		support oles: Past due or lump sum alimony, spo	ousal support, child support, ma	aintenance, divorce settlement, property s	ettlement
		Give specific information			
	Examp ■ No	benefits; unpaid loans you made to		sick pay, vacation pay, workers' compens	ation, Social Security
	□ res.	Give specific information			
		ts in insurance policies les: Health, disability, or life insurance;	health savings account (HSA);	credit, homeowner's, or renter's insurance	e
	Yes.	Name the insurance company of each Company name:		Beneficiary:	Surrender or refund
					value:
		Term Life Insu	ırance with Metlife	James Frascati	\$0.00
 32	Any in	Insurance: Ho			\$0.00
OZ.	If you a			ce policy, or are currently entitled to receive	ve property because
	_	Give specific information			
	Examp ■ No	against third parties, whether or not oles: Accidents, employment disputes, in Describe each claim			
			of every nature, including cou	nterclaims of the debtor and rights to s	set off claims
	■ No	Describe each claim	, , ,	•	
		ancial assets you did not already lis	t		
	■ No □ Yes.	Give specific information			
36		he dollar value of all of your entries tart 4. Write that number here			\$80,211.71
Pa	rt 5: De	scribe Any Business-Related Property Yo	u Own or Have an Interest In. Lis	any real estate in Part 1.	
37.	Do you (own or have any legal or equitable interes	t in any business-related propert	y?	
		to Part 6.		-	
	J Yes. €	So to line 38.			

Schedule A/B: Property

Official Form 106A/B

page 5

Debt	or 1	Fran Frascati		Case number (if known)	8-19-71525
Part (cribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	ou Own or Have an Inter	est In.	
46. D	o you	own or have any legal or equitable interest in any farn	n- or commercial fish	ing-related property?	
I	No. 0	Go to Part 7.			
I	☐ Yes.	Go to line 47.			
Part 7	7:	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
		have other property of any kind you did not already lis	st?		
	•	es: Season tickets, country club membership			
	No	N			
Ц	Yes. (Give specific information			
54	Add th	ne dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
04.	Add ti	to donar value of all of your challes from fact 7. White t	indi namber nere		φυ.υυ
Part 8	3:	List the Totals of Each Part of this Form			
		: Total real estate, line 2			\$370,000.00
		: Total vehicles, line 5	\$9,894.00	=	
		: Total personal and household items, line 15	\$4,900.00	=	
58.	Part 4	: Total financial assets, line 36	\$80,211.71	-	
59.	Part 5	: Total business-related property, line 45	\$0.00	-	
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00	_	
61.	Part 7	: Total other property not listed, line 54	+\$0.00	-	
62.	Total _I	personal property. Add lines 56 through 61	\$95,005.71	Copy personal property to	stal \$95,005.71
63.	Total o	of all property on Schedule A/B. Add line 55 + line 62			\$465,005,71

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:		
Debtor 1	Fran Frascati			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK	
	8-19-71525			
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exemp
--

1.	Which set of exemptions are you claiming?	Check one only, even	if your spouse is filing with you.	
	\square You are claiming state and federal nonbank	ruptcy exemptions. 11	1 U.S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 U	.S.C. § 522(b)(2)		
2.	For any property you list on Schedule A/B t	hat you claim as exer	mpt, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	e Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
5 Seaton Street Massapequa, NY 11758 Nassau County	\$370,000.00		\$1.00	11 U.S.C. § 522(d)(1)
Residence: House Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2015 Kia Sedona 12,502 miles	\$9,894.00		\$3,775.00	11 U.S.C. § 522(d)(2)
Ellie II olii osiledale ALD. G. 1			100% of fair market value, up to any applicable statutory limit	
2015 Kia Sedona 12,502 miles Line from Schedule A/B: 3.1	\$9,894.00		\$6,119.00	11 U.S.C. § 522(d)(5)
ene nom <i>concedite vez.</i> en			100% of fair market value, up to any applicable statutory limit	
Household: tables, chairs, beds, microwave, toaster oven, coffee	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
maker, dressers, Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Electronics: Tv's, Laptop Line from Schedule A/B: 7.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)
EIRO HOITI GORGAAIG PAD. 111			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

De	btor 1 Fran Frascati			Case number (if known)	8-19-71525
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim	Specific laws that allow exemption
		Schedule A/B	CHE	eck only one box for each exemption.	
	Clothes: standard Line from Schedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
	Jewelry: Wedding Rings, Engagement ring purchased over 30	\$4,000.00		\$1,600.00	11 U.S.C. § 522(d)(4)
	years ago for less than \$4,000 Line from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit	
	Jewelry: Wedding Rings, Engagement ring purchased over 30	\$4,000.00		\$2,400.00	11 U.S.C. § 522(d)(5)
	years ago for less than \$4,000 Line from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
	Line IIom Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
	Simple Checking 1154: TD Bank (Jointly owned with spouse)	\$395.79		\$43.85	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Savings account (9169): TD Bank (Jointly owned with spouse)	\$48,724.83			11 U.S.C. § 522(d)(5)
	Inheritance Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Checking account 5693: Chase (Jointly owned with spouse)	\$43.07		\$43.07	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	Savings account 8236: Chase (Jointly owned with spouse)	\$31,028.02			11 U.S.C. § 522(d)(5)
	Inheritance Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3			led on or after the date of adjustmen	t.)
	■ No				
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case?	
	□ No				
	☐ Yes				

Fill in this information to identify you	ır case:				
Debtor 1 Fran Frascati					
First Name	Middle Name Last N	ame			
Debtor 2 (Spouse if, filing) First Name	Middle Name Last N	ame		-	
United States Bankruptcy Court for the	EASTERN DISTRICT OF NEW YORK	(
Coop number 0 40 74505				-	
Case number 8-19-71525 (if known)				☐ Check	if this is an
				_	ed filing
					Ü
Official Form 106D					
Schedule D: Creditors	Who Have Claims Sec	ured b	y Propert	У	12/15
	If two married people are filing together, both out, number the entries, and attach it to this f				
1. Do any creditors have claims secured by	y your property?				
\square No. Check this box and submit t	his form to the court with your other schedu	ules. You ha	ve nothing else t	to report on this form.	
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
	more than one secured claim, list the creditor se	C	olumn A	Column B	Column C
	s a particular claim, list the other creditors in Part	2. As A	mount of claim o not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Wells Fargo Bank, NA	Describe the property that secures the clair		alue of collateral. \$0.00	claim \$370,000.00	If any \$0.00
Creditor's Name	5 Seaton Street Massapequa, NY				
c/o Woods Oviatt Gilman	11758 Nassau County				
700 Crossroads Building	Residence: House				
2 State St. (Todd Marks)	As of the date you file, the claim is: Check all apply.	that			
Rochester, NY 14614	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgag car loan)	e or secured			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lion)			
_	☐ Statutory fleri (such as tax fleri, mechanics) ☐ Judgment lien from a lawsuit	lien)			
At least one of the debtors and another	- Nede	e purpose	e only		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	e purpose	S Offiny		
Date debt was incurred 2016	Last 4 digits of account number	2387			
Wolle Forms Hows					
Wells Fargo Home Mortgage	Describe the property that secures the clair	m:	\$517,960.61	\$370,000.00	\$147,960.61
Creditor's Name	5 Seaton Street Massapequa, NY				
	11758 Nassau County				
	Residence: House				
PO Box 10335	As of the date you file, the claim is: Check all apply.	that			
Des Moines, IN 50306	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortgag	e or secured			
Debtor 2 only	car loan)	lian)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's ☐ Judgment lien from a lawsuit	iien)			
At least one of the debtors and another					
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred 09/1/1989	Last 4 digits of account number	4394			

Official Form 106D

Debtor 1 Fran Frascati		Case n	umber (if known)	8-19-71525	
First Name Middle N	ame Last Name				
2.3 Wells Fargo Srvcing Ctr Creditor's Name Home Equity Payment Proc. MAC B6955-01B PO Box 31557 Billings, MT 59107-9900 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Describe the property that secures the clai 5 Seaton Street Massapequa, NY 11758 Nassau County Residence: House As of the date you file, the claim is: Check al apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgager car loan) Statutory lien (such as tax lien, mechanic's Judgment lien from a lawsuit Other (including a right to offset)	I that	\$18,767.77	\$370,000.00	\$18,767.77
Date debt was incurred	Last 4 digits of account number	1989			
If this is the last page of your form, add Write that number here: Part 2: List Others to Be Notified for Use this page only if you have others to be trying to collect from you for a debt you of the state of the	or a Debt That You Already Listed the notified about your bankruptcy for a debt to someone else, list the creditor in Part to you listed in Part 1, list the additional credit	hat you alread 1, and then list	the collection age	or example, if a collectincy here. Similarly, if ye	ou have more
Name, Number, Street, City, State & Lynn Botwinik Alemeleh, Esq. (Referee) 11 Lotus Street Cedarhurst, NY 11516	Zip Code		n Part 1 did you ente	or the creditor? 2.2	
Name, Number, Street, City, State & Wells Fargo Bank NA PO Box 10335 Des Moines, IA 50306			n Part 1 did you ente account number <u>1</u>	er the creditor? 2.3	
Name, Number, Street, City, State & 3 Wells Fargo Home Mortgag PO Box 14411 Des Moines, IA 50306-3411			n Part 1 did you ente	ar the creditor? 2.2	
Name, Number, Street, City, State & 2 Wells Fargo Home Mortgag PO Box 14591 Des Moines, IA 50306-3591	e [']		n Part 1 did you ente	er the creditor? 2.2	
Name, Number, Street, City, State & Woods Oviatt Gilman LLP 700 Crossroads Building 2 State Street Rochester, NY 14614	Zip Code		n Part 1 did you ente account number <u>1</u>	er the creditor? 2.2	

Official Form 106D

Fill in this infor	mation to identify your	case:		
Debtor 1	Fran Frascati			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F NEW YORK	
Case number	8-19-71525			
(if known)				Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

- 1. Do any creditors have priority unsecured claims against you?
 - No. Go to Part 2.
 - ☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

- 3. Do any creditors have nonpriority unsecured claims against you?
 - No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 - ☐ Yes.

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Tot	al Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Tot	al Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	0.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	0.00

Official Form 106 E/F

Fill in this infor	mation to identify your	case:		
Debtor 1	Fran Frascati			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK	
Case number	8-19-71525			
(if known)				☐ Check if this is a amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

I	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Code	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5	/				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Case 8-19-71525-las Doc 10-1 Filed 03/15/19 Entered 03/15/19 12:18:03

Fill in this in	nformation to identify your	case:			
Debtor 1	Fran Frascati				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name		
(Spouse II, IIIIII)) First Name				
United State	es Bankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK		
Case numbe	er 8-19-71525				☐ Check if this is an
,					amended filing
Schedu Codebtors a Deople are fi	iling together, both are equ	re also liable for any deb ally responsible for supp	olying correct informat	ion. If more space is n	12/15 ate as possible. If two married leeded, copy the Additional Page, p of any Additional Pages, write
	and case number (if known)			o tilis page. On tile top	o of any Additional Pages, write
1. Do yo	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Yes					
Arizona, ■ No. G □ Yes. 3. In Column in line 2	, California, Idaho, Louisiana Go to line 3. Did your spouse, former spouse mn 1, list all of your codebte again as a codebtor only in 1000, Schedule E/F (Official	Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran	erto Rico, Texas, Wash with you at the time? spouse as a codebtor tor or cosigner. Make	ington, and Wisconsin.) if your spouse is filing sure you have listed the	y states and territories include g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	olumn 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, line	۵
	ame			Schedule E/F, I	
				☐ Schedule G, lin	
- Nı	umber Street			_	
Ci		State	ZIP Code		
3.2				☐ Schedule D, line	e
	ame			☐ Schedule E/F, I	
				☐ Schedule G, lin	
Nı	umber Street			<u> </u>	
Ci		State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Fill in this information to	o identify your case:	
Debtor 1	Fran Frascati	
Debtor 2 (Spouse, if filing)		
United States Bankrup	tcy Court for the: EASTERN DISTRICT OF NEW YORK	
Case number 8-1 (If known)	9-71525	Check if this is:
		A supplement showing postpetition chapter 13 income as of the following date:
Official Form	1061	MM / DD/ YYYY
0 - 1 1 - 1 - 1 - 1	Varre Iraa area	

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Preschool Teacher	Self Employed/Driver
	Include part-time, seasonal, or self-employed work.	Employer's name	Community Nursery School	T & P Paper
	Occupation may include student or homemaker, if it applies.	Employer's address	100 Park Blvd. Massapequa, NY 11758	95 Cantiague Rock Road Westbury, NY 11590
		How long employed the	here? 13 years	1 year

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 844.50 \$ 4,653.83

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1	Fran Frascati		C	Case number (if kn	own)	8-19-7	71525		
			-							
					Fan Dabton 4		East.) a la 4 a 4 0		
					For Debtor 1			Debtor 2 filing sp		
	Con	y line 4 here	4.	_	\$ 844	.50	\$		53.83	
	006	,					*	-,0	.00.00	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 71	.88	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b.			.00	\$		0.00	•
	5c.	Voluntary contributions for retirement plans	5c.		. —	.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	5d.		\$ 0	.00	\$		0.00	•
	5e.	Insurance	5e.			.00	\$		0.00	•
	5f.	Domestic support obligations	5f.		\$ 0	.00	\$		0.00	•
	5g.	Union dues	5g.		\$ 0	.00	\$		0.00	•
	5h.	Other deductions. Specify:	5h.	.+	\$ 0	.00	+ \$		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	:	\$71	.88	\$		0.00	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 772	2.62	\$	4,6	53.83	
8.		all other income regularly received:								
	8a.	Net income from rental property and from operating a business, profession, or farm								
		Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.			.00	\$	3,0	06.67	
	8b.	Interest and dividends	8b.		\$0	.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c.		\$ 0	.00	\$		0.00	
	8d.	Unemployment compensation	8d.		\$ 0	.00	\$		0.00	•
	8e.	Social Security	8e.		\$ 0	.00	\$		0.00	•
	8f.	Other government assistance that you regularly receive								
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	;							
		Nutrition Assistance Program) or housing subsidies.								
		Specify:	8f.		\$ 0	.00	\$		0.00	
	8g.	Pension or retirement income	 8g.		\$ 0	.00	\$		0.00	•
	8h.	Other monthly income. Specify: Contribution from daughter	8h.	.+	\$ 2,000	.00	+ \$		0.00	•
_			_							٦
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,000	.00	\$	3,	006.67	<u>'</u>
					1	$\overline{}$				
10.		· · · · · · · · · · · · · · · · · · ·	10.	\$_	2,772.62	+ \$_	7,6	60.50	= \$	10,433.12
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.								
11.	Stat	e all other regular contributions to the expenses that you list in Schedule	J.							
		ude contributions from an unmarried partner, members of your household, your	depe	ende	ents, your room	mates	, and			
		er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	ovoilo	hlo	to now expense	oc lict	nd in S	shodulo	,	
	Spe		avalla	JUIC	to pay expense	53 1130	50 III 00	11.		0.00
	•						_	г		
12.		the amount in the last column of line 10 to the amount in line 11. The res								
		e that amount on the Summary of Schedules and Statistical Summary of Certain	in Liai	bilit	ies and Related	l Data	, if it	12.	• 2	10,433.12
	appl	iles						12.	Ψ	. 5, 755.12
									Combin	
12	Do.	you expect an increase or decrease within the year after you file this form	2					ı	nonthly	y income
13.	■	you expect an increase or decrease within the year after you file this form No.	•							
	_	Yes. Explain:								

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Del	otor 1 Fran Frascati		Ch	eck if this is:	
				An amended filing	
	ouse, if filing)			A supplement show 13 expenses as of	wing postpetition chapter the following date:
Uni	ited States Bankruptcy Court for the: _EASTERN DISTRICT OF NEW YO	ORK		MM / DD / YYYY	
Cas	se number 8-19-71525				
1	known)				
\cap	fficial Form 106J				
	chedule J: Your Expenses				12/1
Be	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this timber (if known). Answer every question.				or supplying correct
Pai	rt 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	btor 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	daughter			■ Yes □ No
		son		21	■ Yes
		doughtor		23	□ No
		daughter			■ Yes □ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Es	rt 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a suppoplicable date.				
the	clude expenses paid for with non-cash government assistance it a value of such assistance and have included it on <i>Schedule I: Y</i> Ifficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	e 4.	\$	3,250.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	· ———	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.	·	0.00
5	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hor	me equity loans	4d.	\$ •	0.00

Debtor 1 Fran Frascati		Case num	ber (if known)	8-19-71525
5. Utilities:				
6a. Electricity, heat, natur	al gas	6a.	\$	342.00
6b. Water, sewer, garbag	_	6b.	\$	134.72
	e, Internet, satellite, and cable services	6c.	\$	242.45
6d. Other. Specify:	,, momor, caromo, and casts someon	6d.	·	0.00
. Food and housekeeping s	unnlies	7.	\$	500.00
. Childcare and children's e	• •	8.	\$	0.00
Clothing, laundry, and dry		9.	\$	0.00
 Personal care products an 			\$	
		10.	· : —	0.00
. Medical and dental expens		11.	\$	0.00
	s, maintenance, bus or train fare.	12.	\$	160.00
Do not include car payments	eation, newspapers, magazines, and books	13.	\$	0.00
			·	
Charitable contributions a	nu rengious donations	14.	\$	0.00
5. Insurance.	dusted from your pay or included in lines 4 or 20			
15a. Life insurance	ducted from your pay or included in lines 4 or 20.	15a.	\$	335.59
15b. Health insurance		15a. 15b.	·	
			·	0.00
15c. Vehicle insurance		15c.	·	542.74
15d. Other insurance. Spec		15d.	\$	90.67
	deducted from your pay or included in lines 4 or 2			
Specify:		16.	\$	0.00
7. Installment or lease payme			_	
17a. Car payments for Veh		17a.		0.00
17b. Car payments for Veh	icle 2	17b.	\$	0.00
17c. Other. Specify:		17c.	\$	0.00
17d. Other. Specify:		17d.	\$	0.00
. Your payments of alimony	, maintenance, and support that you did not re	port as		
	n line 5, Schedule I, Your Income (Official Form	1 06I). 18.	\$	0.00
Other payments you make	to support others who do not live with you.		\$	0.00
Specify:		19.		
	ses not included in lines 4 or 5 of this form or o	on Schedule I: Yo	our Income.	
20a. Mortgages on other p	roperty	20a.	\$	0.00
20b. Real estate taxes		20b.	\$	0.00
20c. Property, homeowner	's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, a	and upkeep expenses	20d.	\$	0.00
20e. Homeowner's associa	ition or condominium dues	20e.	\$	0.00
. Other: Specify:		21.	·	0.00
				0.00
Calculate your monthly ex	penses			
22a. Add lines 4 through 21.			\$	5,598.17
22b. Copy line 22 (monthly e	expenses for Debtor 2), if any, from Official Form 1	06J-2	\$	
22c. Add line 22a and 22b.	The result is your monthly expenses.		\$	5,598.17
	, , ,			3,000.17
Calculate your monthly ne				
23a. Copy line 12 (your co.	mbined monthly income) from Schedule I.	23a.	\$	10,433.12
23b. Copy your monthly ex	penses from line 22c above.	23b.	-\$	5,598.17
•				,
23c. Subtract your monthly	expenses from your monthly income.			
The result is your mor		23c.	\$	4,834.95
•	-			
	or decrease in your expenses within the year			
	nish paying for your car loan within the year or do you ex	pect your mortgage	payment to incre	ease or decrease because o
modification to the terms of your	mortgage?			
■ No.				
☐ Yes. Explain he	re:			

Fill in this in	iformation to identify your	case:			
Debtor 1	Fran Frascati				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
Case numbe	er 8-19-71525				☐ Check if this is an amended filing
	orm 106Dec	an Individual	Debtor's Sche	dulas	
Deciai	ation About a	in marviduai	Depior 5 Sche	aules	12/15
obtaining mo years, or bot		n connection with a bank	or amended schedules. Mal ruptcy case can result in fin		
Did you	u pay or agree to pay some	eone who is NOT an attori	ney to help you fill out bank	ruptcy forms?	
■ No					
☐ Ye	es. Name of person				/ Petition Preparer's Notice, Signature (Official Form 119)
	enalty of perjury, I declare y are true and correct.	that I have read the sum	nary and schedules filed wi	th this declaration and	ı
X /s/ I	Fran Frascati		X		
	n Frascati nature of Debtor 1		Signature of Deb	tor 2	
Date	March 14, 2019		Date		

Official Form 106Dec

Fill	in this info	ormation to identify you	r case:			
De	btor 1	Fran Frascati				
De	btor 2	First Name	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States I	Bankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
Ca	se number	8-19-71525				
(if k	nown)				_	Check if this is an mended filing
Ωſ	ficial F	orm 107				
		-	Δffairs for Individ	duals Filing for B	ankruntev	4/16
info nun	rmation. If nber (if kno	more space is needed, wn). Answer every ques	attach a separate sheet to	this form. On the top of any	equally responsible for sup y additional pages, write you	
1.	What is yo	our current marital statu	s?			
	■ Marri	ed narried				
2.	During the	e last 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	List all of the places you I	ived in the last 3 years. Do n	ot include where you live now	<i>1</i> .	
	Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory ico, Texas, Washington and W	
	■ No					
	☐ Yes.	Make sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Exp	lain the Sources of You	r Income			
4.	Fill in the t	otal amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No ■ Yes.	Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current year until iled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,403.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 8-19-71525-las Doc 10-1 Filed 03/15/19 Entered 03/15/19 12:18:03

De	ebtor 1 Fr	an Frasca	ti		Case	e number (if known)	8-19-7152	5
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incor Check all that app		Gross income (before deductions and exclusions)
	r last caler anuary 1 to	ndar year: December	31, 2018)	■ Wages, commissions, bonuses, tips	\$9,612.00	☐ Wages, comm bonuses, tips	issions,	
				☐ Operating a business		Operating a bu	usiness	
		dar year be December		■ Wages, commissions, bonuses, tips	\$7,541.00	☐ Wages, comm bonuses, tips	issions,	
				☐ Operating a business		Operating a bu	usiness	
	and other winnings. List each	public bene If you are fil	fit payments; ing a joint cas he gross inco	er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separat	est; dividends; money collec you received together, list it c	ted from lawsuits; ro only once under Deb	yalties; and tor 1.	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of incomposition Describe below.	me	Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
6.	Are eithe ☐ No.	Neither De individual p	ebtor 1 nor Dorimarily for a 90 days befo Go to line 7	s debts primarily consumer lebtor 2 has primarily consu- personal, family, or househol are you filed for bankruptcy, die bach creditor to whom you pai	imer debts. Consumer debts d purpose." d you pay any creditor a tota	l of \$6,425* or more	?	
			paid that cre not include	editor. Do not include paymen payments to an attorney for the on 4/01/19 and every 3 years	its for domestic support oblignis bankruptcy case.	ations, such as child	d support ar	
	■ Yes.			r both have primarily consure you filed for bankruptcy, die		I of \$600 or more?		
		■ No.	Go to line 7					
		□ Yes	List below e include pay	each creditor to whom you paid ments for domestic support of this bankruptcy case.				
	Creditor	's Name and	d Address	Dates of payme	nt Total amount	Amount you	Was this p	ayment for

Case number (if known) 8-19-71525

7.	Within 1 year before you filed for bankrupte <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gene control, or owner of 20% of	eral partners; partners of their voting	erships of which y g securities; and a	ou are a genera any managing a	al partner; corporations agent, including one fo
	No					
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			paid	still owe		
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		nents or transfer a	any property on a	account of a d	ebt that benefited an
	No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pai	t 4: Identify Legal Actions, Repossession	s. and Foreclosures				
	List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Wells Fargo Bank NA, v. Jm Frascati Jr. aka James Frascati Jr.	Nature of the case Monetary Damages	Court or agency Supreme Court County of Nass	t of the	Status of the	ne case
	aka James Frascati aka Jim Frascati, Frank Frascati aka Fran B. Frascati aka Fran K. Frascati, etal Index No. 16-002387	Damages	State of New Y 100 Supreme C Mineola, NY 11	ork Court Drive	☐ On appe	
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below		rty repossessed, f	oreclosed, garni	shed, attached	d, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date	•	Value of the
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		uding a bank or fir	nancial institutio	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount
12.	Within 1 year before you filed for bankruptocourt-appointed receiver, a custodian, or a No Yes		rty in the possessi			efit of creditors, a

Debtor 1 Fran Frascati

Deb	otor 1 Fran Frascati	Case number	r (if known) 8-19-7152	5
Par	rt 5: List Certain Gifts and Contributions			
13.	_ ' ' '	cy, did you give any gifts with a total value of more	than \$600 per person	?
	No☐ Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	Value
	per person	Describe the girts	the gifts	Value
	Person to Whom You Gave the Gift and			
	Address:			
14.		cy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	No			
	Yes. Fill in the details for each gift or cont			
	Gifts or contributions to charities that tota more than \$600	Describe what you contributed	Dates you contributed	Value
	Charity's Name		oonii ibatoa	
	Address (Number, Street, City, State and ZIP Code)	0000 11 001 11 475 000 11	0/00/0040	* 400.00
	Kars 4 Kids 1805 Swarthmore Avenue	2002 Mercury Sable with 175,000 miles	9/20/2018	\$400.00
	Lakewood, NJ 08701			
Par	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrupto	y or since you filed for bankruptcy, did you lose any	vthing because of the	ft. fire. other disaster.
10.	or gambling?	y or onless you mou to built aproy, and you loss any	, aming booddoo or ano	it, mo, calor alcactor,
	■ No.			
	■ No □ Yes. Fill in the details.			
	- 100. This in the dotaile.	escribe any insurance coverage for the loss	Date of your	Value of property
	how the loce occurred	clude the amount that insurance has paid. List pending	loss	lost
	ins	surance claims on line 33 of Schedule A/B: Property.		
Par	tt 7: List Certain Payments or Transfers			
16.	Within 1 year before you filed for bankrupto	y, did you or anyone else acting on your behalf pay	or transfer any prope	erty to anyone you
	consulted about seeking bankruptcy or pre	paring a bankruptcy petition?		,,
	Include any attorneys, bankruptcy petition prep	parers, or credit counseling agencies for services require	ed in your bankruptcy.	
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address Email or website address	transferred	or transfer was made	payment
	Person Who Made the Payment, if Not You			
	Thaler Law Firm PLLC		\$5,000.00 +	\$5,310.00
	675 Old Country Road Westbury, NY 11590		\$310.00	
17.	Within 1 year before you filed for bankrupto promised to help you deal with your credito	ry, did you or anyone else acting on your behalf pay	or transfer any prope	erty to anyone who
	Do not include any payment or transfer that yo			
	□ No			
	NoYes. Fill in the details.			
	— 100.1 iii iii tilo detailo.	Department and value of any property	Data navement	Amaunt of
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Debtor 1 Fran Frascati Case number (if known) 8-19-71525

	Person Who Was Paid Address	Description and v transferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment
	Thaler Law Firm PLLC 675 Old Country Road Westbury, NY 11590	Fees for prior be mitigation, and				Unknown
	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers made include gifts and transfers that you have already include you have already include yes. Fill in the details.	iness or financial affa e as security (such as t	tirs? he granting of a se			
	Person Who Received Transfer Address	Description and v property transferr			any property or received or debts change	Date transfer was made
	Person's relationship to you Novak Auto Recycling P.O. Box 908 Long Beach, NY 11561	2003 Volkswago 119,184 miles w due to transmis	as junked	none		9/16/2017
	none					
	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.		y property to a se	elf-settled tr	ust or similar device (of which you are a
	Name of trust	Description and v	alue of the prope	rty transferi	red	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Stor	age Units		
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa No Yes. Fill in the details.	other financial accour	nts; certificates o			
		ast 4 digits of ccount number	Type of accoun instrument	clo	nte account was osed, sold, oved, or unsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, any	safe deposi	it box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 ye	ear before yo	ou filed for bankrupto	y?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		escribe the	contents	Do you still have it?

Case number (if known) 8-19-71525

Par	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust
	■ No			
	☐ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Valu
Par	t 10: Give Details About Environmental Inform	nation		
For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground	•	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	=			
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	,	ronmental law? Include settlements a	and orders.
	■ No			
	Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City,	Nature of the case	Status of the case
		State and ZIP Code)		
Par	t 11: Give Details About Your Business or Cor	nnections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have an	y of the following connections to any	/ business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	y (LLC) or limited liability partnershi	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execu	tive of a corporation		
	☐ An owner of at least 5% of the voting or	r equity securities of a corporation		

Official Form 107

Debtor 1 Fran Frascati

Case 8-19-71525-las Doc 10-1 Filed 03/15/19 Entered 03/15/19 12:18:03

Debtor 1 Fran Frascati		Case number (if known) 8-19-71525
■ No. None of the above applies. Go to	Part 12.	
☐ Yes. Check all that apply above and fil	I in the details below for each business.	
Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.
		Dates business existed
28. Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to	anyone about your business? Include all financial
■ No □ Yes. Fill in the details below.		
Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Part 12: Sign Below		
	false statement, concealing property, or	I I declare under penalty of perjury that the answers robtaining money or property by fraud in connection years, or both.
/s/ Fran Frascati		
Fran Frascati Signature of Debtor 1	Signature of Debtor 2	
Date March 14, 2019	Date	
Did you attach additional pages to Your Statem	ent of Financial Affairs for Individuals Fi	ling for Bankruptcy (Official Form 107)?
■ No		
□Yes		
Did you pay or agree to pay someone who is no ■ No	t an attorney to help you fill out bankrup	otcy forms?
☐ Yes. Name of Person Attach the Bankru	uptcy Petition Preparer's Notice, Declaration	n, and Signature (Official Form 119).

Fill in this inforr	nation to identify your case:
Debtor 1	Fran Frascati
Debtor 2 (Spouse, if filing)	
United States E	Bankruptcy Court for the: Eastern District of New York
Case number (if known)	8-19-71525

Chec	k as directed in lines 17 and 21:
	cording to the calculations required by this atement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
-	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

						Colum Debto		Debt	mn B or 2 or filing spouse
 Your gross wages, salary, tip payroll deductions). 	os, bonuses	, overtime	, and c	ommissions (before	e all	\$	801.00	\$	4,653.83
. Alimony and maintenance pa Column B is filled in.	ayments. Do	not include	e paym	ents from a spouse it	f	\$	0.00	\$	0.00
 All amounts from any source of you or your dependents, i from an unmarried partner, me and roommates. Do not includ you listed on line 3. Net income from operating a 	ncluding chembers of you e payments f	ild suppor ur househo rom a spou	t. Inclu ld, you ise. Do	de regular contributic r dependents, parents not include payment	ons s,	\$	2,000.00	\$	0.00
business, profession, or farr	n Debtor	1	De	ebtor 2					
Gross receipts (before all deductions)	\$	0.00	\$	5,018.35					
Ordinary and necessary operating expenses	-\$	0.00	-\$	2,011.68					
Net monthly income from a business, profession, or farm	\$	0.00	\$	3,006.67 Cop	oy e -> \$	·	0.00	\$	3,006.67
. Net income from rental and	other real pr	operty	Debto						
Gross receipts (before all dedu	ıctions)		\$	0.00					
Ordinary and necessary opera	ting expense	s	-\$	0.00					
Net monthly income from renta	al or other rea	al property	\$	0.00 Copy her	re -> \$	S	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1	Fran Frascati		Case number	(if known)	8-19-7152	25	
			Column A Debtor 1		Column B Debtor 2 c		
7. l i	nterest, dividends, and royalties		\$	0.00	\$	0.00	
8. L	Jnemployment compensation		\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received was a benefit the Social Security Act. Instead, list it here:	under					
	For you\$\$)_					
	For your spouse \$ 0.00)_					
	Pension or retirement income. Do not include any amount received that was a penefit under the Social Security Act.	а	\$	0.00	\$	0.00	
r c	ncome from all other sources not listed above. Specify the source and amount on the source and source and include any benefits received under the Social Security Act or payments eceived as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put total below.	r					
		_	\$	0.00	\$	0.00	
			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.	+	\$	0.00	\$	0.00	
	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$	2,801.00	+ \$_	7,660.50		0,461.50
Part 2	Copy your total average monthly income from line 11.						0,461.50
_	Calculate the marital adjustment. Check one:						
_	✓ You are not married. Fill in 0 below.✓ You are married and your spouse is filing with you. Fill in 0 below.						
	<u> </u>						
	You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT r dependents, such as payment of the spouse's tax liability or the spouse's s						
	Below, specify the basis for excluding this income and the amount of income adjustments on a separate page.					•	
	If this adjustment does not apply, enter 0 below.						
		\$ \$		_			
		΅ •\$		_			
		Ψ					
	Total	\$	0.00	<u> </u>	opy here=>		0.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$1	0,461.50
15.	Calculate your current monthly income for the year. Follow these steps:						
	15a. Copy line 14 here=>					\$1	0,461.50
	Multiply line 15a by 12 (the number of months in a year).					x 1	2
	15b. The result is your current monthly income for the year for this part of the	form.				\$12	25,538.00

Debto	or 1	Fran Frascati		Case number (if known)	8-19-71525
16	. Cal	culate the median family income that applies to you.	Follow these step	DS:	
	16a	. Fill in the state in which you live.	NY		
	16h	Fill in the number of people in your household.	5		
		Fill in the median family income for your state and size	of household		¢ 108,343.00
		To find a list of applicable median income amounts, go instructions for this form. This list may also be available	online using the l		<u> </u>
17		v do the lines compare?			
	17a	11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT	fill out Calculation	of Your Disposable Income (C	Official Form 122C-2).
	17b	Line 15b is more than line 16c. On the top of pa 1325(b)(3). Go to Part 3 and fill out Calculation your current monthly income from line 14 above	on of Your Dispo		
Par	t 3:	Calculate Your Commitment Period Under 11 U.S.	.C. § 1325(b)(4)		
18.	Cop	y your total average monthly income from line 11.			\$ 10,461.50
19.	con	luct the marital adjustment if it applies. If you are managed that calculating the commitment period under 11 U. use's income, copy the amount from line 13.			our
	19a	. If the marital adjustment does not apply, fill in 0 on line	19a.		-\$0.00
	19b	. Subtract line 19a from line 18.			\$10,461.50
20.	Cal	culate your current monthly income for the year. Fol	llow these steps:		40 404 50
	20a	. Copy line 19b			\$10,461.50
		Multiply by 12 (the number of months in a year).			x 12
	20b	. The result is your current monthly income for the year t	for this part of the	form	\$ 125,538.00
	20c	Copy the median family income for your state and size	of household fror	n line 16c	\$108,343.00
	21.	How do the lines compare?			
		☐ Line 20b is less than line 20c. Unless otherwise o period is 3 years. Go to Part 4.	rdered by the cou	rt, on the top of page 1 of this f	form, check box 3, The commitment
		Line 20b is more than or equal to line 20c. Unless commitment period is 5 years. Go to Part 4.	otherwise ordere	d by the court, on the top of pa	ge 1 of this form, check box 4, The
Par	t 4:	Sign Below			
	Bys	igning here, under penalty of perjury I declare that the in	nformation on this	statement and in any attachme	ents is true and correct.
)		Fran Frascati			
		an Frascati gnature of Debtor 1			
	•	March 14, 2019			
	lf v	MM / DD / YYYY ou checked 17a, do NOT fill out or file Form 122C-2.			
	•	ou checked 17a, do NOT till out of the Form 122C-2.	form. On line 39 o	f that form, copy your current n	nonthly income from line 14 above.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

							_				
Fill in	this info	ormation to ider	ntify you	r case:							
Debto	or 1	Fran Frascat	i								
5.1.											
Debto											
(Spou	ise, if filin	g)									
United	d States I	Bankruptcy Court	for the:	Eastern Dis	strict of New Yorl	<u>k</u>					
Case	number	8-19-71525									
(if kno	wn)							☐ Chec	k if this is	an amended	d filing
	l Form 1		latia	of Vo	ur Diene	cabla li	200m0				0.44.0
Cha	pter	13 Calcu	iatioi	10110	ur Dispo	Sable II	icome				04/16
		form, you will ne Period (Official F			copy of <i>Chapte</i>	er 13 Stateme	ent of Your Cu	rrent Monthly	/ Income a	nd Calculatio	on of
space	is neede	e and accurate a ed, attach a sepa es, write your na	rate she	et to this for	rm, Include the						
Part 1	: Ca	Iculate Your De	ductions	from Your I	ncome						
the	questio	I Revenue Servi ns in lines 6-15. may also be av	To find	the IRS stan	dards, go onlin	e using the					
exp	enses if	expense amounts they are higher th d do not deduct a	an the st	tandards. Do	not include any	operating ex	penses that you	ı subtracted fr	om income		
If yo	our expe	nses differ from m	nonth to r	month, enter	the average exp	ense.					
Not	te: Line n	umbers 1-4 are n	ot used i	n this form. T	hese numbers a	apply to inforr	nation required	by a similar fo	orm used in	chapter 7 ca	ses.
5.	The nu	mber of people	used in	determining	your deduction	ns from inco	me				
	plus the	ne number of peo e number of any a nber of people in	additiona	l dependents						5	
Nat	tional St	andards	You mu	ıst use the IR	S National Stan	dards to ansv	wer the question	ns in lines 6-7			
6.		clothing, and otl rds, fill in the doll					d in line 5 and th	he IRS Nation	al	\$	2,051.00
7.	the doll people	-pocket health c ar amount for out who are 65 or old than this IRS amo	t-of-pock derbeca	et health care use older pe	e. The number of ople have a high	of people is sp ther IRS allow	lit into two cate ance for health	goriespeople	e who are u	nder 65 and	

Official Form 122C-2

otor 1	Fran Frascati		Case number (if kr	nown) 8-19	9-71525	
People	who are under 65 years of age					
7a	. Out-of-pocket health care allowance per person	\$52				
7b	. Number of people who are under 65	X 5				
7c	. Subtotal. Multiply line 7a by line 7b.	\$260.00	Copy here=>	\$2	60.00	
People	who are 65 years of age or older					
7d	. Out-of-pocket health care allowance per person	\$ 114				
7e	. Number of people who are 65 or older	x 0				
7f.	Subtotal. Multiply line 7d by line 7e.	\$	Copy here=>	\$	0.00	
7g	. Total. Add line 7c and line 7f	\$_	260.00	Copy tot	al here=> \$_	260.00
_ocal S	Standards You must use the IRS Local Standards to	answer the guestions	in lines 8-15.			
	on information from the IRS, the U.S. Trustee Prog ptcy purposes into two parts:	ıram has divided the I	RS Local Standard	for housing	g for	
_	sing and utilities - Insurance and operating expen	ses				
_	sing and utilities - Mortgage or rent expenses					
separa 3. Ho	wer the questions in lines 8-9, use the U.S. Trusted to instructions for this form. This chart may also bousing and utilities - Insurance and operating expetthe dollar amount listed for your county for insurance	e available at the bank enses: Using the number	kruptcy clerk's office er of people you ente	e.	•	832.00
). H c	ousing and utilities - Mortgage or rent expenses:					
9a	. Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense			\$ 3,1	66.00	
9b	. Total average monthly payment for all mortgages a	nd other debts secured	I by your home.			
	To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.					
	Name of the creditor	Average month payment	ly			
	Wells Fargo Home Mortgage	\$\$.73			
	9b. Total average monthly paymer	s	.73 Copy	3,		eat this amount ne 33a.
9c	. Net mortgage or rent expense.				7	
	Subtract line 9b (total average monthly payment) fror rent expense). If this number is less than \$0, ent		\$	0.00	Copy here=> \$_	0.00
afi	you claim that the U.S. Trustee Program's division fects the calculation of your monthly expenses, fill explain why:			incorrect a	and \$ _	0.00

Case number (*if known*) **8-19-71525**

11.	Local transportation expenses: Check the number of veh	icles for which you claim	an ownership	or operating	expense.	
	☐ 0. Go to line 14.					
	☐ 1. Go to line 12.					
	■ 2 or more. Go to line 12.					
12.	Vehicle operation expense: Using the IRS Local Standard	ds and the number of veh	icles for which	you claim th	e	000.00
	operating expenses, fill in the Operating Costs that apply fo	,	•			608.00
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loar more than two vehicles.					
Ve	hicle 1 Describe Vehicle 1:					
13a.	Ownership or leasing costs using IRS Local Standard		. \$	0.00		
13b.	Average monthly payment for all debts secured by Vehicle	1.				
	Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 months bankruptcy. Then divide by 60.		at			
	Name of each creditor for Vehicle 1	Average monthly payment				
	-NONE-	\$				
	Total Average Monthly Payment	\$	Copy here => -\$	0	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$	0, enter \$0	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Ve	hicle 2 Describe Vehicle 2:					
13d.	Ownership or leasing costs using IRS Local Standard		. \$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	2. Do not include costs fo	r			
	Name of each creditor for Vehicle 2	Average monthly payment				
	-NONE-	\$				
	Total average monthly payment	\$0.00	Copy here => -\$	0.00	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense				Copy net	
	Subtract line 13e from line 13d. if this number is less than \$	0, enter \$0	\$	0.00	Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of				the \$	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in not claim more than the IRS Local Standard for <i>Public Tran</i>	1 or more vehicles in line what you believe is the a	e 11 and if you	claim that y		0.00

Fran Frascati

Debtor 1

8-19-71525

Case number (if known)

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 370.90 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 0.00 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form 0.00 of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or 0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment 0.00 expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. 4,121.90 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23. These are additional deductions allowed by the Means Test. Additional Expense Deductions Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance 0.00 Disability insurance 0.00 Health savings account Copy total here=> Total 0.00 0.00 Do you actually spend this total amount? No. How much do you actually spend? \$ 26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may 0.00 include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b) 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 0.00 By law, the court must keep the nature of these expenses confidential.

Fran Frascati

Debtor 1

ebtor 1	Fran Frascati		Case number (if know	n) 8-1	9-7152)	
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insu	urance and operatir	g expens	ses on		
	If you believe that you have home energy on 8, then fill in the excess amount of home er		gy costs included in	expenses	s on line		
	You must give your case trustee document amount claimed is reasonable and necessa		must show that the	additiona	l	\$_	0.00
	Education expenses for dependent child \$160.42* per child) that you pay for your depublic elementary or secondary school.						
	You must give your case trustee document claimed is reasonable and necessary and r		must explain why th	e amoun	t		
	* Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun or	n or after the date o	f adjustm	ent.	\$ 0.00	
	Additional food and clothing expense. Thigher than the combined food and clothing than 5% of the food and clothing allowance	allowances in the IRS National Standa					
	To find a chart showing the maximum addit instructions for this form. This chart may als			parate			
	You must show that the additional amount claimed is reasonable and necessary.					\$_	0.00
	Continuing charitable contributions. The instruments to a religious or charitable orga			ash or fin	ancial		
	Do not include any amount more than 15%	of your gross monthly income.				\$_	0.00
32.	Add all of the additional expense deduct	tions.				\$	0.00
	Add lines 25 through 31.						
	Add lines 25 through 31.						
Dedu	actions for Debt Payment	in property that you own including h	some mortgages v	robiolo			
Dedu 33. F	· ·		nome mortgages, \	ehicle			
Dedu 33. F	or debts that are secured by an interest	 33a through 33e. ent, add all amounts that are contractual 					
Dedu 33. F	or debts that are secured by an interest bans, and other secured debt, fill in lines o calculate the total average monthly paym	 33a through 33e. ent, add all amounts that are contractual 					ge monthly
Dedu 33. F Id T	or debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for ba	33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ally due to each sec	ured	=>	Avera paym	ent
Dedu 33. F	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymereditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here	 33a through 33e. ent, add all amounts that are contractual 	ally due to each sec	ured	=>		
Dedu 33. F I C 33a.	or debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home Copy line 9b here Loans on your first two vehicles	33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ally due to each sec	ured			3,404.73
Dedu 33. F 10 T C 33a.	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	: 33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ally due to each sec	ured	=>		3,404.73 0.00
33. F 10 T c 33a.	or debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home Copy line 9b here Loans on your first two vehicles	: 33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ally due to each sec	ured			3,404.73
Dedu 33. F 16 T c 33a.	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	: 33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ally due to each sec	ured	=>		3,404.73 0.00
33. Fig. 7 c. 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here	: 33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ally due to each sec	ured	=> ment		3,404.73 0.00
Dedu 33. F k T c 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	: 33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ally due to each sec	oes payr	=> ment		3,404.73 0.00
Dedu 33. F k T c 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	: 33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ot E	oes payr olude tax r insuran	=> ment		3,404.73 0.00
Dedu 33. F k T c 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	: 33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ot [ooes payr nclude tax r insuran No Yes	=> ment	\$\$ \$\$	3,404.73 0.00
Dedu 33. F k T c 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	: 33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ot E	ooes payr nclude tax r insuran No Yes	=> ment	\$ \$ \$	3,404.73 0.00
Dedu 33. F k T c 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	: 33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ot E	ooes payr nclude tax r insuran No Yes No Yes	=> ment	\$\$ \$\$	3,404.73 0.00
33. Fig. 7 c. 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	: 33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ot E	ooes payr nclude tax r insuran No Yes	=> ment	\$ \$ \$	3,404.73 0.00
33. Fig. 7 c. 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	: 33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ot C	ooes payr nclude tax r insuran No Yes No Yes	=> ment	\$ \$ \$	3,404.73 0.00
33. Fig. 7 c. 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	: 33a through 33e. ent, add all amounts that are contractua nkruptcy. Then divide by 60.	ot C	ooes payr nclude tax r insuran No Yes No Yes	=> => ment ces ce?	\$ \$ \$	3,404.73 0.00

ebtor 1	Fran	n Frascati			Case	number (if known)	8-19-71525	
		debts that you listed in lin						
	l No.	Go to line 35.						
•	Yes.	State any amount that you listed in line 33, to keep poly Next, divide by 60 and fill	ossession of your propert					
Name	e of the	creditor	Identify property that s	ecures the debt		Total cure amount		nthly cure
			5 Seaton Street Ma 11758 Nassau Co		NY			
Wel	Is Far	go Home Mortgage	Residence: House		\$	125,190.2	22 ÷ 60 = \$	2,086.50
					\$ \$		÷ 60 = \$	
							÷ 60 = +\$ _	
					Total	\$ 2,086.	.50 Copy total here=>	\$2,086.50
35. D o	o vou (owe any priority claims - s	such as a priority tax. ch	nild support. o	∟ r alimonv - tha	 at		
		due as of the filing date of						
	No.	Go to line 36.						
	l Yes.	Fill in the total amount of a ongoing priority claims, su			e current or			
		Total amount of all past-	due priority claims			0.	. 00 ÷ 60	\$0.00
36. P r	rojecte	ed monthly Chapter 13 pla	n payment		9	S		
Of the To	ffice of e Exec o find a l	multiplier for your district as the United States Courts (fo cutive Office for United State list of district multipliers that incl instructions for this form. This list	or districts in Alabama an es Trustees (for all other oudes your district, go online o	d North Carolir listricts). using the link spe	na) or by cified in the	.	Copy total	
A۱	verage	monthly administrative exp	ense			\$	here=> \$	
		of the deductions for debes 33e through 36.	ot payment.				\$	5,491.23
Total	Deduc	ctions from Income						
38. A	dd all d	of the allowed deductions						
(Copy lir expens	ne 24, All of the expenses a re allowances	llowed under IRS	\$	4,121.90	_		
		ne 32, All of the additional e			0.00	-		
C	Copy lir	ne 37, All of the deductions	for debt payment	+\$	5,491.23	-		

Debtor 1 _	-ran Frascati			Case i	number (if known) 8-	19-71525	
Part 2:	Determine You	ur Disposable Income Under 11 U.S.C. § 132	25(b)(2)				
		rent monthly income from line 14 of Form 1 Current Monthly Income and Calculation of				\$	10,461.50
chile disal rece	dren. The month oility payments for ived in accordan	oly necessary income you receive for supporting a construction of the construction of	er care payments n 122C-1, that you	, or	\$).00	
41. Fill i emp in 11	n all qualified re loyer withheld fro	etirement deductions. The monthly total of all om wages as contributions for qualified retirem (7) plus all required repayments of loans from	ent plans, as spec	cified	\$	0.00	
42. Tota	l of all deduction	ons allowed under 11 U.S.C. § 707(b)(2)(A).	Copy line 38 here	=>	\$ 9,613	3.13	
expe their circu	enses and you hat expenses. You imstances and d	ial circumstances. If special circumstances ju ave no reasonable alternative, describe the spenust give your case trustee a detailed explanal ocumentation for the expenses.	ecial circumstance ation of the specia	I			
Describ	e the special ci	rcumstances	Amount of	expen	se		
_			\$		_		
_			\$				
_			\$				
		Total	\$0.	00	Copy here=>\$	0.00	
44. Tot a	ıl adjustments.	Add lines 40 through 43.	=:	> \$_	9,613.13	Copy here=> -\$	9,613.13
45. Cal o	ulate your mon	nthly disposable income under § 1325(b)(2).	Subtract line 44 f	rom line	e 39.	\$	848.37
Part 3:	Change in Inc	ome or Expenses					
have time you	e changed or are your case will be filed your petition	or expenses. If the income in Form 122C-1 or virtually certain to change after the date you five open, fill in the information below. For example, check 122C-1 in the first column, enter line 2 in when the increase occurred, and fill in the a	iled your bankrupt ble, if the wages re In the second co	cy petit ported lumn, e	ion and during the increased after		
Form	Line	Reason for change	Date of ch	ange	Increase or decrease?	Amount of cha	nge
☐ 122C-	2 1 2 1				☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Increase ☐ Decrease ☐ Increase	\$ \$ \$	
☐ 122C-					Decrease	\$	

Case 8-19-71525-las Doc 10-1 Filed 03/15/19 Entered 03/15/19 12:18:03

Debtor 1	Fran Frascati	Case number (if known)	8-19-71525
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare	e that the information on this statement and in any atta	achments is true and correct.
Y	/s/ Fran Frascati		
^	Fran Frascati		
	Signature of Debtor 1		
	March 14, 2019		
	MM / DD / YYYY		

Debtor 1 Fran Frascati Case number (if known) 8-19-71525

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 09/01/2018 to 02/28/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Community Nursery School

Income by Month:

6 Months Ago:	09/2018	\$778.50
5 Months Ago:	10/2018	\$811.50
4 Months Ago:	11/2018	\$778.50
3 Months Ago:	12/2018	\$814.50
2 Months Ago:	01/2019	\$778.50
Last Month:	02/2019	\$844.50
	Average per month:	\$801.00

Line 4 - Contributions to household expenses of the debtor or dependents

Source of Income: Contribution by Daughter

Income by Month:

6 Months Ago:	09/2018	\$2,000.00
5 Months Ago:	10/2018	\$2,000.00
4 Months Ago:	11/2018	\$2,000.00
3 Months Ago:	12/2018	\$2,000.00
2 Months Ago:	01/2019	\$2,000.00
Last Month:	02/2019	\$2,000.00
	Average per month:	\$2,000.00

Debtor 1 Fran Frascati Case number (if known) 8-19-71525

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 09/01/2018 to 02/28/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: T&P Paper

Income by Month:

6 Months Ago:	09/2018	\$4,345.00
5 Months Ago:	10/2018	\$4,625.00
4 Months Ago:	11/2018	\$5,750.00
3 Months Ago:	12/2018	\$4,463.00
2 Months Ago:	01/2019	\$4,330.00
Last Month:	02/2019	\$4,410.00
	Average per month:	\$4,653.83

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Income from Operation of Business

Income/Expense/Net by Month:

-	Date	Income	Expense	Net
6 Months Ago:	09/2018	\$9,461.10	\$3,379.93	\$6,081.17
5 Months Ago:	10/2018	\$3,711.94	\$1,491.21	\$2,220.73
4 Months Ago:	11/2018	\$3,315.90	\$1,400.60	\$1,915.30
3 Months Ago:	12/2018	\$6,738.83	\$3,049.23	\$3,689.60
2 Months Ago:	01/2019	\$4,373.30	\$1,753.52	\$2,619.78
Last Month:	02/2019	\$2,509.00	\$995.56	\$1,513.44
_	Average per month:	\$5,018.35	\$2,011.68	
	_		Average Monthly NET Income:	\$3,006.67

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 8-19-71525-las Doc 10-1 Filed 03/15/19 Entered 03/15/19 12:18:03

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

			Eastern District of New Tork	\	
In re	Fran Frascati	İ	D.L. ()	Case No.	8-19-71525
			Debtor(s)	Chapter	13
1. F			OMPENSATION OF ATTOR		
	e rendered on beha	alf of the debtor(s) in content	e the filing of the petition in bankruptcy, inplation of or in connection with the bank	kruptcy case is as fol	
	For legal service	ces, I have agreed to accept		\$	5,000.00
	Prior to the fili	ng of this statement I have i	received	\$	5,000.00
					0.00
2. 1	The source of the co	ompensation paid to me was	3:		
	☐ Debtor	Other (specify):	Spouse		
3. Т	The source of comp	ensation to be paid to me is	:		
	Debtor	☐ Other (specify):			
4. I	I have not agree	ed to share the above-disclos	sed compensation with any other person	unless they are memb	pers and associates of my law firm.
ſ			compensation with a person or persons woof the names of the people sharing in the		
5. 1	In return for the abo	ove-disclosed fee, I have ag	reed to render legal service for all aspects	s of the bankruptcy c	ase, including:
b c	. Preparation and	filing of any petition, sched of the debtor at the meeting	and rendering advice to the debtor in dete lules, statement of affairs and plan which of creditors and confirmation hearing, an	may be required;	
6. F	Represer		closed fee does not include the following any dischargeability actions, judio.		es, relief from stay actions or
			CERTIFICATION		
	certify that the for ankruptcy proceedi		ent of any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
M	arch 14, 2019		/s/ Andrew M. Tha	aler	
Date		Andrew M. Thaler			
			Signature of Attorne Thaler Law Firm F		
			675 Old Country F		
			Westbury, NY 115		
			(516) 279-6700 Fa athaler@athalerla		
			Name of law firm		